1	tens ses		7 11 3	A.			
ΟN	1B# 2050-0024;	Expires <u>12/31/2014</u>			AU	VMD / Mr.	
FO Th	ND MPLETED RM TO: e Appropriate ate or Regional fice.	United States RCRA SUBTITL	Environme E C SITE	ental Protect	ion Agen	VMD/WEMM Cy 2 2012 CEIVED	ST. TOWNSON OF STREET
1.	Reason for Submittal	Reason for Submittal:				rmation / to obtain an EPA ID numb	er
MARK ALL BOX(ES) THAT APPLY		 □ To provide a Subsequent Notification (to update site identification information for this location) □ As a component of a First RCRA Hazardous Waste Part A Permit Application □ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #) □ As a component of the Hazardous Waste Report (If marked, see sub-bullet below) 					
		☐ Site was a TSD facility and/or generator of ≥1,000 kg of hazardous waste, >1 kg of acute hazardous waste, or >100 kg of acute hazardous waste spill cleanup in one or more months of the report year (or State equivalent LQG regulations)					
2.	Site EPA ID Number	EPA ID Number					
3.	Site Name	Name: Industrial Laminates / Norplex Inc.					
4.	Site Location Information	Street Address: 665 Lybrand St. / PO Box 977					
		City, Town, or Village: Postville				County: Allamakee	
		State: IA	Country: US	SA		Zip Code: 52162	
5.	Site Land Type	Private County Distri	ict Fed	leral Triba	и 🔲 м	unicipal State Othe	er
6.	NAICS Code(s) for the Site	A. 3 2 6 1 3	0	C.			
(8	(at least 5-digit codes)	В		D.			
7.	Site Mailing Address	Street or P.O. Box: 665 Lybrand St. / PO Box 977					
		City, Town, or Village: Postville					
		State: IA	Country: US	SA		Zip Code: 52162	
8.	Site Contact	First Name: Jon	MI: B	Last: Thorsten	son		
	Person	Title: Manufacturing Engineer					
		Street or P.O. Box: 665 Lybrand St. / PO Box 977					
		City, Town or Village: Postville	1				
		State: IA	Country: US	zip Code: 52162			
		Email: jthorstenson@norplex-micarta.	.com	<u> </u>			
		Phone: 563-864-7321	Ex	t.:		Fax: 563-864-4231	
9.	Legal Owner and Operator of the Site	A. Name of Site's Legal Owner: Honey	ywell			Date Became 1/01/1982 Owner:	
		Owner Type: Private County	District	Federal	Tribal	Municipal State Othe	∍r
		Street or P.O. Box: 101 Columbia Rd.					
		City, Town, or Village: Morristown				Phone:	
		State: NJ	Country: US	SA		Zip Code: 07962	
		B. Name of Site's Operator: Industrial Laminates / Norplex Inc. Date Became Operator: 9/15/1996					
		Operator Type: Private County	District	Federal [Municipal State Othe	

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10. Type of Regulated Waste Activity (at your site) Mark "Yes" or "No" for all <u>current</u> activities (as of the date submitting the	form); complete any additional boxes as instructed.		
A. Hazardous Waste Activities; Complete all parts 1-10.			
Y N 1. Generator of Hazardous Waste If "Yes", mark only one of the following − a, b, or c.	Y N ✓ 5. Transporter of Hazardous Waste If "Yes", mark all that apply.		
Generates, in any calendar month, 1,000 kg/mo (2,200 lbs./mo.) or more of hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lbs./mo) of acute hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 100 kg/mo (220 lbs./mo) of acute hazardous spill cleanup material.	a. Transporter b. Transfer Facility (at your site) Y N 6. Treater, Storer, or Disposer of Hazardous Waste Note: A hazardous waste Part B permit is required for these activities. Y N 7. Recycler of Hazardous Waste		
b. SQG: 100 to 1,000 kg/mo (220 – 2,200 lbs./mo) of non-acute hazardous waste.	•		
c. CESQG: Less than 100 kg/mo (220 lbs./mo) of non-acute hazardous waste. If "Yes" above, indicate other generator activities in 2-4.	N 8. Exempt Boiler and/or Industrial Furnace If "Yes", mark all that apply. a. Small Quantity On-site Burner Exemption		
Y N 2. Short-Term Generator (generate from a short-term or one-time event and not from on-going processes). If "Yes", provide an explanation in the Comments section.	b. Smelting, Melting, and Refining Furnace Exemption		
Y N ✓ 3. United States Importer of Hazardous Waste	Y 9. Underground Injection Control		
Y N 4. Mixed Waste (hazardous and radioactive) Generator	Y N 10. Receives Hazardous Waste from Offsite		
B. Universal Waste Activities; Complete all parts 1-2.	C. Used Oil Activities; Complete all parts 1-4.		
Y N 1. Large Quantity Handler of Universal Waste (you accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste managed at your site. If "Yes", mark all that apply.	Y N 1. Used Oil Transporter If "Yes", mark al! that apply. a. Transporter b. Transfer Facility (at your site)		
a. Batteries b. Pesticides c. Mercury containing equipment d. Lamps e. Other (specify)	Y N 2. Used Oil Processor and/or Re-refiner If "Yes", mark all that apply. a. Processor b. Re-refiner Y N 3. Off-Specification Used Oil Burner Y N 4. Used Oil Fuel Marketer If "Yes", mark all that apply.		
Y N 2. Destination Facility for Universal Waste Note: A hazardous waste permit may be required for this activity.	a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner b. Marketer Who First Claims the Used Oil Meets the Specifications		

| | | A | D | | 0 | 7 | 3 | | 4 | 8 | 9 | | 2 | 8 | 8 | **EPA ID Number** OMB#: 2050-0024; Expires 12/31/2014 Eligible Academic Entities with Laboratories—Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K You can ONLY Opt into Subpart K if: you are at least one of the following: a college or university; a teaching hospital that is owned by or has a formal affiliation agreement with a college or university; or a non-profit research institute that is owned by or has a formal affiliation agreement with a college or university; AND you have checked with your State to determine if 40 CFR Part 262 Subpart K is effective in your state Y N 1. Opting into or currently operating under 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories See the item-by-item instructions for definitions of types of eligible academic entities. Mark all that apply: a. College or University b. Teaching Hospital that is owned by or has a formal written affiliation agreement with a college or university c. Non-profit Institute that is owned by or has a formal written affiliation agreement with a college or university 2. Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories 11. Description of Hazardous Waste Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed. D001 D007 D008 D039 F003 F005 Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-Regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed.

EPA ID Number [A D 0 7 3 4	8 9 2 8 8	OMB#: 2050-0024; Expires <u>12/31/2014</u>		
12. Notification of Hazardous Secondary Materi	al (HSM) Activity			
secondary material under 40 CFR 26	42 that you will begin managing, are man 1.2(a)(2)(ii), 40 CFR 261.4(a)(23), (24), our to the Site Identification Form: Notifice	r (25)?		
Material.	um to the Site Identification Form: Notifica	tion for Managing Hazardous Secondary		
13. Comments				
This submittal is an amendment to the biennial	report dated on February 22, 2012.	The changes in this submittal pertain to		
notification of hazardous secondary material ad	ctivity. We've been handling HSM as	an "in-process" material before running it		
through a batch distillation unit to reclaim solve	ents. The attached Hazardous Waste	Management Flowchart maps out the		
routing of hazardous waste and HSM along wit	th instructions for labeling, placarding	and container type.		
	•			
	ű.			
14. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all owner(s) and operator(s) must sign (see 40 CFR 270.10(b) and 270.11).				
Signature of legal owner, operator, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)		
Halim	Alan Johnson / Plant Manager	03/07/2012		
	**			

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ADDENDUM TO THE SITE IDENTIFICATION FORM: NOTIFICATION OF HAZARDOUS SECONDARY MATERIAL ACTIVITY



		form	

You are located in a State that allows you to manage excluded hazardous secondary material (HSM) under 40 CFR 261.2(a)(2)(ii). 261.4(a)(23), (24), or (25) (or state equivalent). See http://www.epa.gov/epawaste/hazard/dsw/statespf.htm for a list of eligible states; AND You are or will be managing excluded HSM in compliance with 40 CFR 261.2(a)(2)(ii), 261.4(a)(23), (24), or (25) (or state equivalent) or you have stopped managing excluded HSM in compliance with the exclusion(s) and do not expect to manage any amount of excluded HSM under the exclusion(s) for at least one year. Do not include any information regarding your hazardous waste activities in this section. 1. Indicate reason for notification. Include dates where requested. ✓ Facility will begin managing excluded HSM as of 01/05/2010 (mm/dd/yyyy). Facility is still managing excluded HSM/re-notifying as required by March 1 of each even-numbered year. Facility has stopped managing excluded HSM as of ______ (mm/dd/yyyy) and is notifying as required. 2. Description of excluded HSM activity. Please list the appropriate codes and quantities in short tons to describe your excluded HSM activity ONLY (do not include any information regarding your hazardous wastes). Use additional pages if more space is needed. a. Facility code b. Waste code(s) for HSM c. Estimated short d. Actual short tons e. Land-based unit tons of excluded HSM (answer using of excluded HSM code (answer using codes listed in the to be managed that was managed codes listed in the Code List section of annually during the most Code List section of the instructions) recent oddthe instructions) numbered year 01 D001, F003 & F005 75 tons 74.4 tons NA 3. Facility has financial assurance pursuant to 40 CFR 261.4(a)(24)(vi). (Financial assurance is required for reclaimers and intermediate facilities managing excluded HSM under 40 CFR 261.4(a)(24) and (25))

N ✓ Does this facility have financial assurance pursuant to 40 CFR 261.4(a)(24)(vi)?

RCRAINFO data entered

HAZARDOUS WASTE MANAGEMENT FLOWCHART TABLE #1: GRADES NOT TO BE RUN THROUGH THE STILL GRADE DESCRIPTION BR25 LABEL PLACARD SELECT CONTAINER 1 AND APPLY BR60 MC507U NA CR 932464 931864 THE FOLLOWING LABEL TO THE CONTAINER ALONG WITH A CLASS MELAMINE MC511AF NA CR MC511A-RT511 NA CR 922904 3 FLAMMABLE PLACARD. 922914 MC511SN CR MC514MG BK CR 922964 932694 DATE THE LABEL UPON INITIAL MC633CP BK CR MC844G CR MC894 CR 932194 928474 ADDITION OF HAZARDOUS WASTE 934424 MCG10YB BK CR 921934 912604 LABEL PLACARD SELECT CONTAINER 1 AND APPLY 981814 THE FOLLOWING LABEL TO THE EPOXY W/ NP130SP WHICR 960084 CONTAINER #2 **CONTAINER #1** CONTAINER ALONG WITH A CLASS HAZARDOUS WASTE NP310LS BK CR NP310LS BN CR 309204 SCRAP TRIMELLITIC ANHYDRIDE 3 FLAMMABLE PLACARD. 959874 CATEGORY NP31DU BK CR NP31DU NA CR 390714 DATE DATE THE LABEL UPON INITIAL NP312 BK 10 oz 1st Pass & 24oz CR NP312 BK 10oz 2nd Pass CR 982684 ADDITION OF HAZARDOUS WASTE 976574 PHENOLIC/EPOXY NP313 BK CR NP315 BK CR 170374 NP315S BK CR NP323 NA Adhesive for Rubber LABEL PLACARD 328324 SELECT CONTAINER 1 AND APPLY 170444 170394 THE FOLLOWING LABEL TO THE NP347 NA CR CONTAINER ALONG WITH A CLASS NP424 TN Core 2nd Pass CR NP500CR NA CR APPROVED FOR NOT APPROVED HAZARDOUS WASTE 3 FLAMMABLE PLACARD. PHENOLIC/EPOXY SCRAP CLASS 170154 DISTILLATION? 106484 335704 NP500GB BK CR (TABLE #1) NP511 MR CR DATE DATE THE LABEL UPON INITIAL NP511 NA CR NP511EM NA CR 298094 397994 ADDITION OF HAZARDOUS WASTE NP513 NA CR NP516 990824 999204 NP517 NP547 CR NP571 NA CR NP613 NA CR LABEL PLACARD SCRAP COMPOUNDED RESIN SELECT CONTAINER 1 AND APPLY THE FOLLOWING LABEL TO THE 998184 APPROVED PROCESS MATERIAL RENOLIC WASH 345094 103404 PHENOLIC WASH CONTAINER ALONG WITH A CLASS NP643 NA CR NP691 BK CR NP691 NA CR 3 FLAMMABLE PLACARD. CLASS DO NOT DATE 170324 DO NOT DATE THE LAREL (NOT 326464 430134 NP842 BK Covers CR HAZARDOUS WASTE YET) SCRAP NP842 BK CR 170614 915634 SP525M GR CR CATEGORY SP526M GR CR RT229 NA CR 984214 LABEL PLACARD 218112 SELECT CONTAINER 1 AND APPLY RT229 BK CR RT313 1st Pass CR 218492 THE FOLLOWING LABEL TO THE PROCESS MATERIAL CONTAINER ALONG WITH A CLASS **EPOXY WASH** RT313 2nd Pass CR RT315 BK 1st Pass 100432 3 FLAMMABLE PLACARD. 100482 DO NOT DATE RT315 BK 2nd Pass DO NOT DATE THE LABEL (NOT RTR324 BK CR 109702 HAZARDOUS WASTE YET) REPORT ANY ADDITIONAL GRADES NOT INCLUDED ON THIS LIST TO MANUFACTURING ENGINEERING PLACARD SELECT CONTAINER 2 AND APPLY THE FOLLOWING LABEL TO THE HAZARDOUS WASTE CONTAINER ALONG WITH A CLASS SCRAP RAGS UNUSABLE BATCH 4 FLAMMABLE SOLIDS PLACARD. -CONDENSATE-WASH SOLVENT PROCESS MATERIAL DISTILLATION DATE DATE THE LABEL UPON INITIAL **ADDITION OF HAZARDOUS WASTE** SELECT CONTAINER 2 AND APPLY THE FOLLOWING LABEL TO THE SELECT CONTAINER 1 OR A CONTAINER ALONG WITH A CLASS LABEL PLACARD PLASTIC IBC AND APPLY THE STILL BOTTOMS-4 FLAMMABLE SOLIDS PLACARD. FOLLOWING LABEL TO THE WELL WATER CONTAINER ALONG WITH A CLASS DATE THE LABEL UPON INITIAL CLASS 3 FLAMMABLE PLACARD. ADDITION OF HAZARDOUS WASTE ADDITIONAL NOTES: ATE CONTACT MANUFACTURING ENGINEERING DATE THE LABEL UPON INITIAL IMMEDIATELY IF LABELS, PLACARDS OR ADDITION OF HAZARDOUS WASTE CONTAINERS ARE UNAVAILABLE. RUNNING LABEL PLACARD OUT OF THESE MATERIALS IS NOT AN LARFI PLACARD EXCUSE FOR IGNORING INSTRUCTIONS. SELECT CONTAINER 2 AND APPLY HAZARDOUS WASTE STILL BOTTOMS SCRAP THE FOLLOWING LABEL TO THE TRIMELLITIC ANHYDRIDE HAZARDOUS WASTE DO NOT DATE HAZARDOUS WASTE IN THE CONTAINER ALONG WITH A CLASS FLUEF DATE APPROVED SATELLITE ACCUMULATION 4 FLAMMABLE SOLIDS PLACARD. AREAS UNTIL 55 GALLONS IS GENERATED. DATE MOVE THE CONTAINER TO A DESIGNATED. DATE THE LABEL UPON INITIAL 90 DAY STORAGE AREA WITHIN 3 DAYS OF ADDITION OF HAZARDOUS WASTE EXCEEDING WASTE LIMITS.

PST 42-10 Rev. A